

*2005 Renewal*  
**LOBBYING REGISTRATION FORM**  
 To be used for initial registrations and renewals.



*Same info. as 2004*

**Instructions**

- Print in ink or type.
- Complete form and return with \$110 registration fee to the Board of Ethics, 2415 Quail Dr., 3<sup>rd</sup> Floor, Baton Rouge, LA 70808, (225) 763-8777 or (800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

**FOR OFFICE USE ONLY**

Postmark Date: 01/24/05

*Ren. 2005*  
*J#8157*  
*\$110.0008*

**1000011**

1. NAME Desselle Stephanie  
Last First MI

2. BUSINESSPHONE (225) 344-2225  
Area Code and Phone Number

3. BUSINESS ADDRESS 251 Florida St. Baton Rouge LA 70804  
Street and No. City State Zip

MAILING ADDRESS P.O. Box 4308 " " 70821  
Street and No. City State Zip

4. EMPLOYER Council for A Better Louisiana

5. EMPLOYER'S ADDRESS Same as above  
Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name Council for A Better Louisiana / Employer

Address P.O. Box 4308

Business or purpose Nonprofit, non-partisan public interest organization

Does this person pay you? yes Salary

If No, who pays you? \_\_\_\_\_

2005 JAN 24 PM 1:33  
 ETHICS REGISTRATION  
 CAMPAIGN FINANCE  
 RECEIVED

# LOBBYING REGISTRATION FORM



2. Name \_\_\_\_\_

Address \_\_\_\_\_

Business or purpose \_\_\_\_\_

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

3. Name \_\_\_\_\_

Address \_\_\_\_\_

Business or purpose \_\_\_\_\_

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

4. Name \_\_\_\_\_

Address \_\_\_\_\_

Business or purpose \_\_\_\_\_

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

## CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.

*Stephanie Dosselle*

Signature of Lobbyist

ATTACH  
2" x 2"  
PHOTOGRAPH  
HERE